

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>AM</i>		<i>06/02/01</i>
O.I.P.E. CLASSIFIER	<i>SV</i>	<i>3</i>	<i>5/1</i>
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	<i>CB</i>	<i>535</i>	<i>05-08-01</i>
	<i>CH</i>	<i>825</i>	<i>8/28/01</i>

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral).... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	<i>5/21/01</i>
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Best Available Copy

If more than 150 claims or 10 actions  
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*5-851*  
*05/17/01*